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Docket Number (Optional) REISSUE APPLICATION DECLARATION BY THE INVENTOR

0656-008US6

As a below named inventor, I hereby declare that:  My residence, mailing address and citizenship are stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in a start number 180, 395.  Tanuary 30, 2001 and for which a							
in patent number 6,180,395,granted							
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TEST APPARATUS							
the specification of which							
X is attached hereto.							
was filed onas reissue application number/							
and was amended on (If applicable)							
(if applicable)							
I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.  I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)							
by reason of a defective specification or drawing.							
X by reason of the patentee claiming more or less than he had the right to claim in the patent.							
by reason of other errors.							
At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:							
Reissue is sought to broaden claims 1, 10, 14, 19, 21, and 23 by removing the word "tablet," so as to clarify that the recited reagent composition(s) may be in any of the forms supported by the specification. See, e.g., column 3, lines 62-65 ("which may be solid, liquid, powder, emulsion, suspension, tablet or substantially any combination separately or admixtured thereof.").							
It is believed that the unnecessary recitation of the term "tablet" in each of claims 1, 10, 14, 19, 21, and 23, was an error made without deceptive intent.							

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page					Docket Number (Optional) 0656-008US6			
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.								
Name(s) Registration Number								
Leslie Meyer-Leon, Registration No. 37,381								
Correspondence Address: Direct all communications about the application to:								
Customer Number			Place Customer Number Bar					
	here Code Label here							
Firm or Individual Name Leslie Meyer-Leon, IP Legal Strategies Group, P.C.								
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Country	USA			-1	·			
Telephone	(508	) 428-4000	Fax	(5	508) 428-1900			
made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.  Full name of sole or first inventor (given name, family name)								
Richard T. Skiffington								
Invertor's/signature Date								
Residence							-	
35 Pleasant At., N. Reading, MA 01864 US  Mailing Address  35 Pleasant St., N. Reading, MA 01864								
Full name of second joint inventor (given name, family name)								
Eliezer Zomer								
Inventor's signature Da				Date 11/28/01				
Residence 374 Kenrick St., Newton, MA 02158				Citizenship u'S				
Mailing Address 374 Kenrick St., Newton, MA 02158								
Full name of third joint inventor (given name, family name)								
Inventor's signature	Date							
Residence	Citizenship							
Mailing Address								
Additional joint invo	ntore are n	amed on congrately numbered sheet	e attached heret					